

ORDER FOR SUPPLIES OR SERVICES					PAGE 1 OF 89
1. CONTRACT/PURCH ORDER/AGREEMENT NO. N0017819D7732		2. DELIVERY ORDER/CALL NO. N6449821F3024		3. DATE OF ORDER/CALL (YYYYMMDD) 2021FEB10	
4. REQUISITION/PURCH REQUEST NO. 1300904703		5. PRIORITY DO-C9			
6. ISSUED BY NAVAL SURFACE WARFARE CENTER PHILA NSWCPD Philadelphia, PA 19112-1403		7. ADMINISTERED BY (if other than 6) SCD: C		8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)	
9. CONTRACTOR CODE 6J8P0 NAME AND ADDRESS Green Expert Technology Inc. 30 Washington Avenue, Suite A-2 Haddonfield, NJ 08033		FACILITY 969536932		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE	
				11. X IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED	
				12. DISCOUNT TERMS Net 30 Days WAWF	
				13. MAIL INVOICES TO THE ADDRESS IN BLOCK SEE SECTION G	
14. SHIP TO CODE SEE SECTION F		15. PAYMENT WILL BE MADE BY CODE HQ0337 DFAS Columbus Center, North Entitlement Operations P.O. Box 182266 Columbus, OH 43218-2266		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.	
16. TYPE OF ORDER DELIVERY/CALL <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/>		This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your _____ furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.			
Green Expert Technology Inc.		(b)(6)			
NAME OF CONTRACTOR		SIGNATURE		TYPED NAME AND TITLE	
<input type="checkbox"/>		If this box is marked, supplier must sign Acceptance and return the following number of copies:		DATE SIGNED (YYYYMMDD)	
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE					
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICES		20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE
	SEE SCHEDULE				
*If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.			24. UNITED STATES OF AMERICA /s/ (b)(6) BY: _____		25. TOTAL (b)(4)
			02/10/2021 CONTRACTING/ORDERING OFFICER		26. DIFFERENCES
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED:					
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE			c. DATE (YYYYMMDD)		
			d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE			28. SHIP. NO.		29. D.O. VOUCHER NO.
			<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		30. INITIALS
f. TELEPHONE NUMBER			31. PAYMENT		32. PAID BY
g. E-MAIL ADDRESS			<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		33. AMOUNT VERIFIED CORRECT FOR
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.			34. CHECK NUMBER		
a. DATE (YYYYMMDD)	b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		35. BILL OF LADING NO.		
37. RECEIVED AT	38. RECEIVED BY (Print)	39. DATE RECEIVED (YYYYMMDD)	40. TOTAL CONTAINERS	41. S/R ACCOUNT NUMBER	42. S/R VOUCHER NO.